

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2013

OF THE CONDITION AND AFFAIRS OF THE

PROVIDENCE PLANTATIONS INSURANCE COMPANY

NAIC Group Code0382	,0382	NAIC Company Code	33430	Employer's ID Num	nber05-0428479		
(Current Perio	od) (Prior Period)						
Organized under the Laws of	Rhode Is	land , St	ate of Domicile or P	ort of Entry	Rhode Island		
Country of Domicile			nited States				
Incorporated/Organized	06/25/1986	G Com	menced Business	04/01/1988			
Statutory Home Office	340 Eas	st Avenue		Warwick, RI, US	S 02886-1802		
	(Street an	id Number)	, (C	City or Town, State, Co			
Main Administrative Office	340 East Ave	,	Warwick, RI, US (401-827-1800		
	(Street and Nur		(City or Town, State, Cour		(Area Code) (Telephone Number)		
Mail Address	P.O. Box 6066		F	Providence, RI, US 02	2940-6066		
(Stre	et and Number or P.C	D. Box)	(City o	r Town, State, Countr	y and Zip Code)		
Primary Location of Books and Reco	ords 340	East Avenue	Warwick, RI	, US 02886-1802	401-827-1800-125		
,		eet and Number)		e, Country and Zip Code)	(Area Code) (Telephone Number		
Internet Website Address		www.p	rovidencemutual.co	m			
Statutory Statement Contact	Richa	ard Albert Sinnigen		401-827-18	300-125		
otatato.) otatomom comuci		(Name)	(Ar		Number) (Extension)		
rsinnigen@provid	lencemutual.com	(Hame)	(/ "	401-822-1872	rumber) (Exteriolor)		
(E-mail A		-		(Fax Number)			
(=	144.000)	OFFICERS	S	(1 47.114.11551)			
Name	Title		Name		Title		
Sandra Glaser Parrillo	Presid		Richard Albert Sin	nigen	Secretary		
Earl Francis Cottam Jr.	. Treasi		THORAGA THEORY CHIL	,	Coordiary		
Leslie Adams Gardner	Robert White	RECTORS OR TR e Parsons	Mary Louise Fazza	ano Jo	ohn Scott Lombardo		
Sandra Glaser Parrillo	Robert White		David Martin Gilde		Michael Rauh Jr. #		
	-	y Litwiii	David Martin Gilde	<u> </u>	WICHAEL RAUT 31. #		
State ofRhode Isla	and						
County ofKent		ss					
The officers of this reporting entity, being above, all of the herein described assets this statement, together with related exhi of the condition and affairs of the said recompleted in accordance with the NAIC that state rules or regulations require difference to the enclosed statement.	were the absolute properlibits, schedules and explar porting entity as of the rep- Annual Statement Instruct erences in reporting not re- his attestation by the descr	ty of the said reporting entity, fractions therein contained, anneorting period stated above, and ions and Accounting Practices elated to accounting practices aribed officers also includes the	ee and clear from any lexed or referred to is a do its income and ded and Procedures Manual procedures, according related corresponding	liens or claims thereon, e full and true statement of uctions therefrom for the al except to the extent the ling to the best of their intellectronic filing with the	except as herein stated, and that all the assets and liabilities and period ended, and have been at: (1) state law may differ; or, (2) formation, knowledge and belief, NAIC, when required, that is an		
Sandra Glaser Parrillo		Richard Albert Sinr	nigen	Farl Fr	ancis Cottam Jr.		
President	•	Secretary			Treasurer		
Subscribed and sworn to before me this 25 day of Fe	bruary, 2014	,	b. If no,	n original filing?	Yes [X] No []		
			2. Date file		02/27/2014		
Ottobaria I Williams N. C. B.	12.		3. Number	r of pages attached			
Stephanie J. Williamson Notary Pub January 16, 2017	IIC						



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14) NAIC Group Code 0382 BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2013 NAIC Company Code 3343									33430				
				3 Dividends Paid or Credited to Policyholders on	4 Direct Unearned Premium	5 Direct Losses Paid (deducting salvage)	6 Direct Losses	7 Direct Losses	8 Direct Defense and Cost Containment Expense	9 Direct Defense and Cost Containment Expense	10 Direct Defense and Cost Containment Expense	11 Commissions and Brokerage	Taxes, Licenses and
	Line of Business	Written	Earned	Direct Business	Reserves	salvage)	Incurred	Unpaid	Paid	Incurred	Unpaid	Expenses	Fees
	Fire												
	Allied lines												
	Multiple peril crop												
	Federal flood												
	Farmowners multiple peril												
4.	Homeowners multiple peril												22,305
5.1	Commercial multiple peril (non-liability portion)												
5.2	Commercial multiple peril (liability portion)												
6.	Mortgage guaranty												
	Ocean marine												
	Inland marine												
10.	Financial guaranty												
	Medical professional liability												
	Earthquake												
13.	Group accident and health (b)												
14.	Credit A & H (group and individual)												
15.1	Collectively renewable A & H (b)												
15.2	Non-cancelable A & H (b)												
	Guaranteed renewable A & H (b)												
15.4	Non-renewable for stated reasons only (b)												
15.5	Other accident only												
15.6	Other accident only												
15.7	All other A & H (b)												
15.8	Federal Employees Health Benefits Plan premium (b)												
	Workers' compensation												
17.1	Other liability - Occurrence												
	Other Liability - Claims-Made												
17.3	Excess workers' compensation												
18.	Products liability												
19.1	Private passenger auto no-fault (personal injury protection)												
19.2	Other private passenger auto liability												
19.3	Commercial auto no-fault (personal injury protection)												
19.4	Other commercial auto liability												
21.1	Private passenger auto physical damage												
21.2	Commercial auto physical damage												
22.	Aircraft (all perils)												
23.	Fidelity												
	Surety												
26.	Burglary and theft						<u> </u>			ļ			
27.	Boiler and machinery												
	Credit												
	Warranty												
	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0	0	0	0
35.	TOTALS (a)	0	0	0	0	0	0	0	0	0	0	0	22,305
	DETAILS OF WRITE-INS				-	1					1		,,,,,,
	DETAILS OF WATE INC												
3403.													
	Summary of remaining write-ins for Line 34 from overflow page	0	n	n	n	Λ	n	n	n	n	Π	n	n
	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	n	0	0	n	0	n	0	n	n	n	0

and number of persons insured under indemnity only products



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

	NAIC Group Code 0382	1 2 Direct Premiums Direct Premiums			PREMIONS AN	•		URING THE YEAR			NAIC Company Code 33430				
	Line of Business			Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees		
	Fire	0	0	0	0	0	0	0	0	0	0	0	ļ		
	Allied lines	U	0	0	0	0	0	0	0	0	0	0			
	Multiple peril crop	0	0	0	0	0	0	0	0	0	0	0	ļU		
	Federal flood	0	0	0	0	0	0	0	0	0	0	0			
	Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0			
4.	Homeowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	22,305		
5.1	Commercial multiple peril (non-liability portion)	0	0	0	0	0	0	0	0	0	0	0			
	Commercial multiple peril (liability portion)	0	0	0	0	0	0	0	0	0	0	0			
	Mortgage guaranty	0	0	0	0	0	0	0	0	0	0	0	(
	Ocean marine	0	0	0	0	0	0	0	0	0	0	0	C		
	Inland marine	0	0	0	0	0	0	0	0	0	0	0	ļ		
10.	Financial guaranty	0	0	0	0	0	0	0	0	0	0	0	ļ		
	Medical professional liability	0	0	0	0	0	0	0	0	0	0	0			
	Earthquake	0	0	0	0	0	0	0	0	0	0	0	C		
13.	Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0			
	Credit A & H (group and individual)	0	0	0	0	0	0	0	0	0	0	0			
	Collectively renewable A & H (b)	0	0	0	0	0	0	0	0	0	0	0			
15.2	Non-cancelable A & H (b)	0	0	0	0	0	0	0	0	0	0	0			
15.3	Guaranteed renewable A & H (b)	0	0	0	0	0	0	0	0	0	0	0			
	Non-renewable for stated reasons only (b)	0	0	0	0	0	0	0	0	0	0	0			
15.5	Other accident only	0	0	0	0	0	0	0	0	0	0	0			
15.6	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0	0	0	0	0	0	0			
	All other A & H (b)	0	0	0	0	0	0	0	0	0	0	0			
15.8	Federal Employees Health Benefits Plan premium (b)	0	0	0	0	0	0	0	0	0	0	0			
	Workers' compensation	0	0	0	0	0	0	0	0	0	0	0	(
	Other liability - Occurrence.	0	0	0	0	0	0	0	0	0	0	0	(
	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	(
	Excess workers' compensation.	0	0	0	0	0	0	0	0	0	0	0	(
	Products liability	0	0	0	0	0	0	0	0	0	0	0	(
19.1	Private passenger auto no-fault (personal injury protection)	0	0	0	Λ	Λ	0	0	0	0	0	0	(
	Other private passenger auto liability	0	0	0	0	Λ	0	0	0	0	0	0	(
	Commercial auto no-fault (personal injury protection)	0	0	Λ		Λ	0	0	0	0	n	0	(
	Other commercial auto liability	Λ	0	Λ	٥	n	0 n	0		0	n	0	(
	Private passenger auto physical damage	n	n	n	 n	n	0 n	n	n	n	n	n	(
21.1	Commercial auto physical damage	n	n	n		o		n	o	n	n	n	΄ ΄		
	Aircraft (all perils)	n	n	0 n	٥	0 ∩	0 ∩	n	0 n	n	n	n	(
	Fidelity	n	n	n	 n	o		n	o	n	n	n	΄ ΄		
	Surety	n	n	n		0 ∩		n	0 n	n	n	n	,		
2 4 . 26.	Burglary and theft	n	0	0 n		0	0	0 n	0		0	0			
	Boiler and machinery	U	0	0		0	0		0		0	0	ļ		
	Credit		0	0		0	0	0		0	0	0	ļ		
			0	0		0	0		0		0	0	ļ		
	Warranty		0	0		0	0		0		0	0	ļ		
	Aggregate write-ins for other lines of business	†		0		0	0	ļ	0	ļū		J	00.00		
35.	TOTALS (a)	0	0	0	0	0	0	1 0	0	0	0	0	22,305		
	DETAILS OF WRITE-INS												1		
							ļ			ļ			ļ		
3402.															
3403.													ļ		
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0			
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	1		

.0 and number of persons insured under indemnity only products

Schedule F - Part 1

NONE

Schedule F - Part 2

NONE

Schedule F - Part 3

NONE

Schedule F - Part 4

NONE

Schedule F - Part 5

NONE

Schedule F - Part 5 - Footnote(a) Detail

NONE

Schedule F - Part 6 SN 1

NONE

Schedule F - Part 6 SN1A Footnote Detail

NONE

Schedule F - Part 6 SN 2

NONE

Schedule F - Part 7

NONE

Schedule F - Part 8

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance 2 3 As Reported (Net of Ceded) Adjustments (Gross of Ceded) ASSETS (Page 2, Col. 3) 1. Cash and invested assets (Line 12)1,216,377 .1,216,377 _0 __0 2. Premiums and considerations (Line 15)0 ۵. 3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)... .0 .0 4 Funds held by or deposited with reinsured companies (Line 16.2)..... .25,851 .25,851 5. Other assets ... 6. Net amount recoverable from reinsurers 0 7. Protected cell assets (Line 27)0 0. 1.242.228 0 1.242.228 8. Totals (Line 28) LIABILITIES (Page 3) 9. Losses and loss adjustment expenses (Lines 1 through 3) 0 ۵. 10. Taxes, expenses, and other obligations (Lines 4 through 8) ... 0 .0 N 0 12. Advance premiums (Line 10) ... ٥. .0 13. Dividends declared and unpaid (Line 11.1 and 11.2) Q. Q 0. 0. 14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12) 15. Funds held by company under reinsurance treaties (Line 13) 16. Amounts withheld or retained by company for account of others (Line 14)0 ۵. .0 .0 17. Provision for reinsurance (Line 16)0 0 18. Other liabilities ... 0 0 0 19. Total liabilities excluding protected cell business (Line 26) 20. Protected cell liabilities (Line 27)0 ٥. 21. Surplus as regards policyholders (Line 37)1,242,228 X X X1,242,228 22. Totals (Line 38) 1.242.228 0 1.242.228

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?	res [] NO [X]
If yes, give full explanation:		

Schedule H - Part 1

NONE

Schedule H - Part 2

NONE

Schedule H - Part 3

NONE

Schedule H - Part 4

NONE

Schedule H - Part 5

NONE

Schedule P - Part 1A - Home/Farm

NONE

Schedule P - Part 1B - Private Passenger

NONE

Schedule P - Part 1C - Comm Auto/Truck

NONE

Schedule P - Part 1D - Workers' Comp

NONE

Schedule P - Part 1E - Comm Multi Peril

NONE

Schedule P - Part 1F - Prof. Liab. Occur

Schedule P - Part 1F - Prof. Liab. Claim

NONE

Schedule P - Part 1G - Special Liability

NONE

Schedule P - Part 1H - Other Liab Occur NONE

Schedule P - Part 1H - Other Liab Claims

NONE

Schedule P - Part 1I - Special Property

NONE

Schedule P - Part 1J - Auto Physical NONE

Schedule P - Part 1K - Fidelity/Surety

NONE

Schedule P - Part 1L - Other NONE

Schedule P - Part 1M - International NONE

Schedule P - Part 1N - Reinsurance A NONE

Schedule P - Part 10 - Reinsurance B NONE

Schedule P - Part 1P - Reinsurance C NONE

Schedule P - Part 1R - Prod Liab Occur NONE

Schedule P - Part 1R - Prod Liab Claims

NONE

Schedule P - Part 1S-Fin./Mtg. Guaranty

NONE

Schedule P - Part 1T - Warranty
NONE

Schedule P - Part 2A NONE

Schedule P - Part 2B

NONE

Schedule P - Part 2C NONE

Schedule P - Part 2D NONE

Schedule P - Part 2E NONE

Schedule P - Part 2F - Prof. Liab. Occur NONE

Schedule P - Part 2F - Prof. Liab. Claim NONE

Schedule P - Part 2G NONE

Schedule P - Part 2H - Other Liab Occur NONE

Schedule P - Part 2H - Other Liab Claim
NONE

Schedule P - Part 2I

NONE

Schedule P - Part 2J

NONE

Schedule P - Part 2K

NONE

Schedule P - Part 2L

NONE

Schedule P - Part 2M

NONE

Schedule P - Part 2N

NONE

Schedule P - Part 20

Schedule P - Part 2P NONE

Schedule P - Part 2R - Prod Liab Occur NONE

Schedule P - Part 2R - Prod Liab Claims

NONE

Schedule P - Part 2S

NONE

Schedule P - Part 2T

NONE

Schedule P - Part 3A

NONE

Schedule P - Part 3B

NONE

Schedule P - Part 3C

NONE

Schedule P - Part 3D

NONE

Schedule P - Part 3E

NONE

Schedule P - Part 3F - Prof. Liab. Occur

Schedule P - Part 3F - Prof. Liab. Claim

NONE

Schedule P - Part 3G NONE

Schedule P - Part 3H - Other Liab Occur NONE

Schedule P - Part 3H - Other Liab Claims

NONE

Schedule P - Part 3I

NONE

Schedule P - Part 3J

NONE

Schedule P - Part 3K

NONE

Schedule P - Part 3L

NONE

Schedule P - Part 3M

NONE

Schedule P - Part 3N

NONE

Schedule P - Part 30

Schedule P - Part 3P

Schedule P - Part 3R - Prod Liab Occur NONE

Schedule P - Part 3R - Prod Liab Claims

NONE

Schedule P - Part 3S

NONE

Schedule P - Part 3T

NONE

Schedule P - Part 4A

NONE

Schedule P - Part 4B

NONE

Schedule P - Part 4C

NONE

Schedule P - Part 4D

NONE

Schedule P - Part 4E

NONE

Schedule P - Part 4F - Prof. Liab. Occur

Schedule P - Part 4F - Prof. Liab. Claim

NONE

Schedule P - Part 4G NONE

Schedule P - Part 4H - Other Liab Occur NONE

Schedule P - Part 4H - Other Liab Claims

NONE

Schedule P - Part 4I - Special Property

NONE

Schedule P - Part 4J

NONE

Schedule P - Part 4K

NONE

Schedule P - Part 4L

NONE

Schedule P - Part 4M

NONE

Schedule P - Part 4N

NONE

Schedule P - Part 40

Schedule P - Part 4P NONE

Schedule P - Part 4R - Prod Liab Occur NONE

Schedule P - Part 4R - Prod Liab Claims

NONE

Schedule P - Part 4S

NONE

Schedule P - Part 4T

NONE

Schedule P - Part 5A- SN1

NONE

Schedule P - Part 5A- SN2

NONE

Schedule P - Part 5A- SN3

NONE

Schedule P - Part 5B- SN1

NONE

Schedule P - Part 5B- SN2

NONE

Schedule P - Part 5B- SN3

Schedule P - Part 5C- SN1

NONE

Schedule P - Part 5C- SN2

NONE

Schedule P - Part 5C- SN3

NONE

Schedule P - Part 5D- SN1

NONE

Schedule P - Part 5D- SN2

NONE

Schedule P - Part 5D- SN3

NONE

Schedule P - Part 5E- SN1

NONE

Schedule P - Part 5E- SN2

NONE

Schedule P - Part 5E- SN3

NONE

Schedule P - Part 5F- SN1A

NONE

Schedule P - Part 5F- SN2A

NONE

Schedule P - Part 5F- SN3A NONE

Schedule P - Part 5F- SN1B NONE

Schedule P - Part 5F- SN2B NONE

Schedule P - Part 5F- SN3B NONE

Schedule P - Part 5H- SN1A NONE

Schedule P - Part 5H- SN2A NONE

Schedule P - Part 5H- SN3A

NONE

Schedule P - Part 5H- SN1B NONE

Schedule P - Part 5H- SN2B NONE

Schedule P - Part 5H- SN3B NONE

Schedule P - Part 5R- SN1A

NONE

Schedule P - Part 5R- SN2A NONE

Schedule P - Part 5R- SN3A NONE

Schedule P - Part 5R- SN1B NONE

Schedule P - Part 5R- SN2B NONE

Schedule P - Part 5R- SN3B NONE

Schedule P - Part 5T- SN1

NONE

Schedule P - Part 5T- SN2

NONE

Schedule P - Part 5T- SN3

NONE

Schedule P - Part 6C - SN1

NONE

Schedule P - Part 6C - SN2

NONE

Schedule P - Part 6D - SN1

NONE

Schedule P - Part 6D - SN2

NONE

Schedule P - Part 6E - SN1

NONE

Schedule P - Part 6E - SN2

NONE

Schedule P - Part 6H - SN1A NONE

Schedule P - Part 6H - SN2A NONE

Schedule P - Part 6H - SN1B NONE

Schedule P - Part 6H - SN2B

NONE

Schedule P - Part 6M - SN1

NONE

Schedule P - Part 6M - SN2

NONE

Schedule P - Part 6N - SN1

NONE

Schedule P - Part 6N - SN2

NONE

Schedule P - Part 60 - SN1

NONE

Schedule P - Part 60 - SN2

NONE

Schedule P - Part 6R - SN1A

NONE

Schedule P - Part 6R - SN2A NONE

Schedule P - Part 6R - SN1B NONE

Schedule P - Part 6R - SN2B NONE

Schedule P - Part 7A - Section 1

NONE

Schedule P - Part 7A - Section 2

NONE

Schedule P - Part 7A - Section 3

NONE

Schedule P - Part 7A - Section 4

NONE

Schedule P - Part 7A - Section 5

NONE

Schedule P - Part 7B - Section 1

NONE

Schedule P - Part 7B - Section 2

NONE

Schedule P - Part 7B - Section 3

NONE

Schedule P - Part 7B - Section 4

NONE

Schedule P - Part 7B - Section 5
NONE

Schedule P - Part 7B - Section 6

NONE

Schedule P - Part 7B - Section 7

NONE

SCHEDULE P INTERROGATORIES

1.	The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.	sions	in Me	edic	al	
1.1	Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:	Yes	[]	No [[X]
1.2	What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?					
1.3	Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?	Yes	[]	No []
1.4	Does the company report any DDR reserve as loss or loss adjustment expense reserve?	Yes	[]	No []
1.5	If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?	Yes	[]	No [.]
1.6	If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:					
	DDR Reserve Included in					
	Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid					
	Years in Which Premiums Were Earned and 1 2 Losses Were Incurred Section 1: Occurrence Section 2: Claims-Made					
	1.601 Prior					
	1.602 2004					
	1.604 2006					
	1.605 2007					
	1.606 2008					
	1.607 2009					
	1.608 2010 1.609 2011					
	1.609 2011					
	1.611 2013					
	1.612 Totals 0					
2.	The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement?	Yes	[X]	No [.]
3.	The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Answer:	Yes	[X]	No [
4.	Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10?	Yes]]	No [[X]
	If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.					
	Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.					
	Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.					
5.	What were the net premiums in force at the end of the year for: (in thousands of dollars)					
	5.1 Fidelity					0
	5.2Surety					0
6.	Claim count information is reported per claim or per claimant (indicate which)					
7.1	among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must	Yes]]	No [[X]
7.2	An extended statement may be attached.					

SCHEDULE T – PART 2 INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN Allocated By States and Territories

Allocated By States and Territories Direct Business Only										
		1 Life (Group and	2 Annuities (Group	3 Disability Income (Group and	4 Long-Term Care (Group and	5 Deposit-Type	6			
States, Etc.		Individual)	and Individual)	Individual)	Individual)	Contracts	Totals			
1. Alabama										
2. Alaska	AK									
3. Arizona										
4. Arkansas	AR									
5. California	CA									
6. Colorado	CO									
7. Connecticut	CT									
8. Delaware	DE									
9. District of Columbia	DC									
10. Florida	FL									
11. Georgia	GA									
12. Hawaii										
13. Idaho	ID									
14. Illinois										
15. Indiana		• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •						
16. lowa	IA									
17. Kansas	KS					l	}			
18. Kentucky										
19. Louisiana						·····				
20. Maine	ME						ļ			
21. Maryland										
22. Massachusetts 23. Michigan 24. Minnesota	MA									
23. Michigan	MI									
24. Minnesota	MN			···						
25. Mississippi										
26. Missouri	MO									
27. Montana	MT									
28. Nebraska	NE									
29. Nevada										
30. New Hampshire										
31. New Jersey										
32. New Mexico										
33. New York										
34. North Carolina										
35. North Dakota	ND									
36. Ohio	OH									
37. Oklahoma										
38. Oregon	OR									
39. Pennsylvania	PA									
40. Rhode Island	RI									
41. South Carolina	sc									
42. South Dakota	SD									
43. Tennessee	TN									
44. Texas	TX									
45. Utah										
46. Vermont	VT	• • • • • • • • • • • • • • • • • • • •		•						
47. Virginia										
48. Washington		• • • • • • • • • • • • • • • • • • • •					·····			
•										
49. West Virginia										
50. Wisconsin					}	<u> </u>	}			
51. Wyoming										
52. American Samoa										
53. Guam	GU									
54. Puerto Rico	PR									
55. US Virgin Islands	VI									
56. Northern Mariana Islands										
57. Canada										
57. Canada										
58. Aggregate Other Alien										

SCHEDULE Y PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
•	_	Ŭ		Ŭ	Ŭ	Name of	, and the second	Ĭ	10		Type of Control	10		
						Securities					(Ownership,			
						Exchange if					Board,	If Control is		
		NAIC	Federal			Publicly	Names of		Relationship to		Management,	Ownership		
Group		Company	ID	Federal		Traded (U.S. or		Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,		Ultimate Controlling	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	*
Oouc	Group Hame	Oodc	INGINIDO	ROOD	Oilt	international)	Of Atmitates	Location	Littity	(Ivaine of Entity/I croon)	imacrice, other)		The Providence	+
							The Providence Mutual Fire			The Providence Mutual Fire			Mutual Fire	
0382	The Providence Group	15040	05-0204000				Insurance Company	RI	UDP		Board	0.0	Insurance Company	1
0302	The Trovidence Group	15040	03-0204000				Trisurance company			Trisurance company	Doar u	0.0	The Providence	
							The Providence Plantations			The Providence Mutual Fire			Mutual Fire	
0382	The Providence Group	33430	05-0428479				Insurance Company	RI	DS	Insurance Company	Ownership		Insurance Company	1
0302	The Providence Group	33430	00-0420479				Trisurance company	N1	Do	Trisurance company	ownersinp	100.0	Trisurance company	
														
		ĺ												

Asterisk	Explanation
1	The Providence Mutual Fire Insurance Company owns 100% of The Providence Plantations Insurance Company.

SCHEDULE Y PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

	PART 2 - SUMMART OF INSURER STRANSACTIONS WITH ANT AFFILIATES											
NAIC Company Code	2 Federal ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	10	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	Reinsurance Recoverable/ (Payable) on Losse and/or Reserve Credit Taken/(Liability)
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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

	MARCH FILING	RESPONSES
1.		WAIVED
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.		YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
5.	APRIL FILING Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
8.	MAY FILING Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	YES
9.	JUNE FILING Will an audited financial report be filed by June 1?	WA I VED
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	WAIVED
11.	AUGUST FILING Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	WAIVED
	The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.	
12.	MARCH FILING Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	SEE EXPLANATION
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	NO
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	N0
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed	NO.
	electronically with the NAIC by March 1?	N0
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	N0
27.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	N0
20	APRIL FILING Will the Credit Insurance Experience Exhibit he filed with the crede of demicile and the NAIC by April 12	NO
28.		N0N0N0
29.		
30.		NO
31.		N0
32.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
	AUGUST FILING	
33.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO

Explanation:

12.

13.

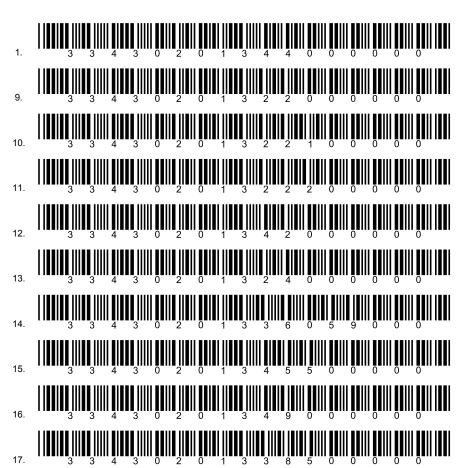
14.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

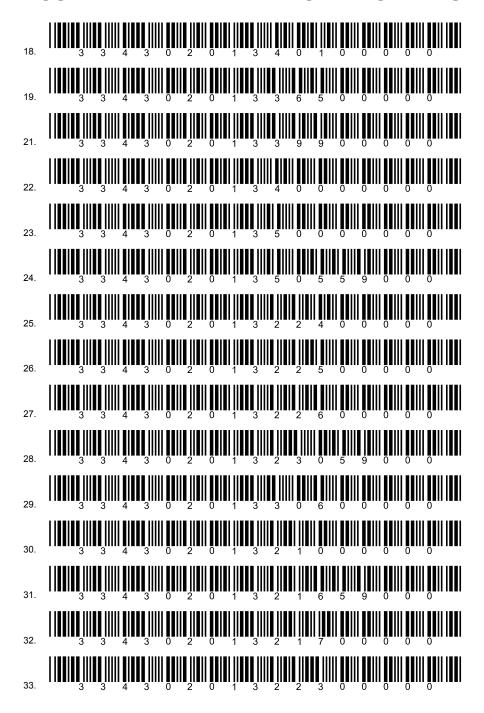
16.
17.
18.
19.
20. The Providence Plantations Insurance Company has received an exemption from filing the Statement of Actuarial Opinion from the State of Rhode Islan Department of Business Regulation Insurance Division for the year ended December 31, 2013.
21.
22.
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Bar Code:

15.



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES



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